

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA CAND 435 (CAND Rev. 04/2018)		TRANSCRIPT ORDER Please use one form per court reporter. <i>CJA counsel please use Form CJA24</i> Please read instructions on next page.					COURT USE ONLY DUE DATE:								
1a. CONTACT PERSON FOR THIS ORDER Donna Gilliland		2a. CONTACT PHONE NUMBER (415) 442-1848			3a. CONTACT EMAIL ADDRESS donna.gilliland@morganlewis.com										
1b. ATTORNEY NAME (if different) Susan D. Resley		2b. ATTORNEY PHONE NUMBER (415) 442-1351			3b. ATTORNEY EMAIL ADDRESS susan.resley@morganlewis.com										
4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE) Morgan Lewis & Bockius LLP 1 Market, Spear Street Tower San Francisco, CA 94105				5. CASE NAME USA v. Lynch				6. CASE NUMBER CR-18-00577							
7. COURT REPORTER NAME (FOR FTR, LEAVE BLANK AND CHECK BOX)→ <input type="checkbox"/> FTR Belle Ball				8. THIS TRANSCRIPT ORDER IS FOR: <input type="checkbox"/> APPEAL <input checked="" type="checkbox"/> CRIMINAL <input type="checkbox"/> In forma pauperis (NOTE: Court order for transcripts must be attached) <input type="checkbox"/> NON-APPEAL <input type="checkbox"/> CIVIL CJA: <u>Do not use this form: use Form CJA24.</u>											
9. TRANSCRIPT(S) REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested), format(s) & quantity and delivery type:															
a. HEARING(S) (OR PORTIONS OF HEARINGS)				b. SELECT FORMAT(S) (NOTE: ECF access is included with purchase of PDF, text, paper or condensed.)				c. DELIVERY TYPE (Choose one per line)							
DATE	JUDGE (initials)	TYPE (e.g. CMC)	PORTION If requesting less than full hearing, specify portion (e.g. witness or time)	PDF (email)	TEXT/ASCII (email)	PAPER	CONDENSED (email)	ECF ACCESS (web)	ORDINARY (30-day)	14-Day	EXPEDITED (7-day)	3-DAY	DAILY (Next day)	HOURLY (2 hrs)	REALTIME
12/19/2018	CRB	Status		●	●	○	○	○	○	○	○	○	●	○	○
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10. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC:															
ORDER & CERTIFICATION (11. & 12.) By signing below, I certify that I will pay all charges (deposit plus additional). 11. SIGNATURE /s/ Susan D. Resley										12. DATE 01/11/2019					

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